

ISSUE SLIP STAPLE AREA (for additional process references)

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   | W        | 71534  | 06-15-99 |
| O.I.P.E. CLASSIFIER |          | 5      | 6-16-99  |
| FORMALITY REVIEW    | Y.M.     | 7160P  | 6-23-99  |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim          | Date    |
|----------------|---------|
| Final Original |         |
| 1              | 3/7/03  |
| 2              | 6/22/04 |
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| Claim          | Date |
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| Claim          | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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